

440 E. Main, Gardner, Kansas 66030 (913) 856-7312 Fax 856-5733

POLICE DEPARTMENT

EMPLOYMENT APPLICATION

This is to advise you that the information solicited in the enclosed application for employment is necessary to complete the background investigation required by official policy to determine your eligibility for employment with the City of Gardner Police Department. In order for the department to have adequate information to complete its investigation, it is necessary that you complete the application in its entirety and submit any and all documents requested. The information solicited, and the results of the investigation that follows, will be used to determine your eligibility for employment

Please sign this form and return same with the application. You should be aware that willfully making a false statement or concealing a material fact on your application or subsequent interview could be the basis for rejection as a candidate for employment.

Print Applicant Name
Signature of Applicant
Date Submitted
Received By

EMPLOYMENT APPLICATION

Please print with black ink or type. All questions require specific answers. Applications not completed in their entirety will not be accepted. Read through the application once before beginning. If you have questions about the application process, please contact Human Resources at (913) 856-0951 or humanresources@gardnerkansas.gov

Position Applied for:		Date:	
Full Name:		DOB:	
Address:	City:	State:	Zip:
Home Telephone:	Business Teleph	none:	
E-mail Address:			
Driver's License #:	State	of Issuance:	
Expiration date of Driver's License:	Heigh	ıt: V	Veight:
Highest Education Level Reached:			
Name of High School and Location:			
Year of High School Graduation:	Attended College:	Yes No Hours	Received:
Name of College and Location:			
College Degree Received:			
Major Course of Study:			
Trade Schools or Military Specialist Schools: (Lis	st Below):		
List any activities that occurred during school attento you in your Police career:	ndance or Military Atten	dance, which you fee	el would be beneficial

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EMPLOYMENT:

Last or present Employer:		Address:
Telephone #:		Supervisor:
Duties/responsibilities:		
Date Started:		Date Left:
Reason for leaving:		
Past Employer:		Address:
Telephone #:		Supervisor:
Duties/responsibilities:		
Date Started:		Date Left:
Reason for leaving:		
Past Employer:		Address:
Telephone #:		Supervisor:
Duties/responsibilities:		
te Started: Date Left:		
Reason for leaving:		
May we contact the above employers to a	ask questions	s about your working skills? Yes No
Explain:		
Have you been in the Military Service?	Yes No	If so, what branch:
Date of Entry:		Date of Discharge:
Type of Discharge:		Highest Rank Attained:
Please attach a copy of Form DD #214 if	you have mil	litary service.
REFERENCES:		
Name:	Address:	Telephone #:
Name:	Address:	Telephone #:
Name:	Address:	Telephone #:

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PERSONAL INFORMATION:

Marital Status:	Name of Spouse:	DOB of Spouse:
Employment of Spouse:		
Please list names and ages o	f children:	
Father's Name:		Address:
Mother's Name:		Address:
Please list names and ages o	f Sisters and Brothers:	
Have you ever been divorced	? Yes No If so, list the	e court of record and the name of ex-spouse:
		crime or engaged in activities, which could compromise Please explain:
Addresses for the past 10 year	ars:	
How long at the Present Addr	ess?	

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PERSONAL INFORMATION:

Social Security #:		
Creditors:		Amount Owed:
Have you ever been in Items repossessed:	nvolved in the following actions? Yes No Garnished Wages:	s: Yes No Bankruptcy Yes No
If the answer is yes to	any of the questions, please describe w	what the results were, when and where:
Please describe your o	oradit rating:	
riease describe your c	stedit fatting.	
Please list bank accou	ints below:	
Checking account #: _	Name of Bank:	Address:
Checking account #: _	Name of Bank:	Address:
Savings account #:	Name of Bank:	Address:
Savings account #:	Name of Bank:	Address:

Motor Vehicle Operation				
Have you ever received a traffic citation?				
Month/year	Traffic violation	City and state	What action resulted? (fined, traffic school, dismissed)	
	Criminal	Charges and/or Arrest	'S	
An arrest is not,	in and of itself, an absolute ba		tors will be taken into consideration	
Either as an adult or a juvenile, have you ever been <u>arrested or charged</u> with a criminal act? Yes No Include charges that were dismissed, dropped, reduced or expunged. If yes, provide the following information.				
Start with most re	Arrest /Conviction	Law Enforcement agency	Penalty	
Explain circumstances				
Date	Arrest /Conviction	Law Enforcement agency	Penalty	
Explain circumstances				
Date	Arrest /Conviction	Law Enforcement agency	Penalty	
Explain circumstances				

Illegal	Drug Involvement	
Have you ever used any illegal drugs (Marijuana, non-prescription drug)? ☐ Yes ☐ No	Mushrooms, LSD, Cocaine, Methamphetamine, or any other	
If Yes, List type of drug, number of times and app	proximate dates:	
Have you ever bought any illegal drugs? ☐ Yes ☐No		
If Yes, List type of drug, number of times and app	proximate dates:	
Have you ever sold any illegal drugs? ☐ Y	es □No	
If Yes, List type of drug, number of times and app	proximate dates:	
Have you ever manufactured, bought, sold, distrives No If yes, explain	ibuted or given away any type of illegal drug or narcotic?	
S	cars & Tattoos	
Do you have any scars, tattoos, or other disting	uishing marks? If yes, explain	
REMINDER: ANY MISREPRESENTATIONS, OMI REJECTION OR TERMINATION OF EMPLOYMEI	ISSIONS OR FALSIFICATIONS WILL BE GROUNDS FOR IMMEDIATI NT.	
Is this application truthful and answered to the best	of your knowledge?	
Signature	 Date	

CITY OF GARDNER EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE

The City of Gardner would appreciate your assistance in completing this brief questionnaire. The answers will be used solely for the purpose of evaluating and reporting the effectiveness of our recruiting and equal employment opportunity efforts. This form will be held separately from your application/resume and <u>will not</u> be used as a basis for any decisions regarding your employment.

COMPLETION OF THIS FORM IS OPTIONAL

Name:	e: (please print)		
Position	ion applied for:Full ti	mePart ti	meSeasonal
1.	. Date of Birth:		
2.	. Gender: □ Male □ Female		
3.	 Race: (Check One) Black Hispanic White Asian/Pacific Islander American Indian/Alaskan Native 		
4.	. Disability: □ None □ Visual □ Hearing □ Physical □ Learning □ Other		
5.	. Are you a veteran of the U.S. Armed Forces?	_YesNo	
How did you learn about this position?			
	Newspaper Gardner News KC Star Lawrence Journal World Miami County Republic Olathe Daily Newspaper Ottawa Herald		
	·		
	Referral:		
	o Name:		
	Name:/Department_		

DISCLOSURE TO EMPLOYMENT APPLICANT

REGARDING PROCUREMENT OF BACKGROUND INVESTIGATION REPORT

In connection with your application for employment with the City of Gardner, we may procure a Background Investigative Report on you as part of the process of considering your candidacy as an employee. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, we will provide you with a copy of the consumer report and a description in writing of your rights under the federal Fair Credit Reporting Act.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights together with this document.

By your signature below, you hereby authorize us to obtain a consumer report and/or an investigative report about you in order to consider you for employment. The information requested below is being used strictly for pre-employment background screening purposes in order to obtain accurate results. The investigative report may include, but not be limited to, criminal history, verifications of employment and education, and driving records. A credit report detailing personal financial history will only be obtained for permissible purposes in consideration of jobs meeting specific criteria.

Applicant's Name:	(PLEASE PRINT)
Position Applied for:	
Applicant's Address:	
City/State/Zip:	
Signature:	
Social Security Number:	
Date of Birth:	
	employment inquiries, under the Age Discrimination in Employment Act of 1967, fan employer for information such as "Date of Birth" or "State Age" on an self, a violation of the Act."
Driver's License Number:	State Issued
a limited access file, detached from your app a background investigation.	assist in the completion of a background investigation. The information will be maintained in dication. The information will be used for the sole purpose of identification when conducting
	y of Rights Under the Fair Credit Reporting Act.
Initials Here:	

Para informacion en espanol, visite <u>www.ftc.gov/credit</u> o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
 - Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate
- Consumer reporting agencies may not report outdated negative information. In most cases, a
 consumer reporting agency may not report negative information that is more than seven years old, or
 bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to
 people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or
 other business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks	Office of the Comptroller of the Currency
(word National" or initials "N.A." appear in or after bank's name)	Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national	Federal Reserve Board
banks, and federal branches/agencies of foreign banks)	Division of Consumer & Community Affairs
	Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings	Office of Thrift Supervision
banks (word "Federal" or initials "F.S.B." appear in federal	Consumer Complaints
institution's name)	Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear	National Credit Union Administration
in institution's name)	1775 Duke Street
	Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal	Federal Deposit Insurance Corporation
Reserve System	Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former	Department of Transportation , Office of Financial Management
Civil Aeronautics Board or Interstate Commerce	Washington, DC 20590 202-366-1306
Commission	
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture
	Office of Deputy Administrator - GIPSA
	Washington, DC 20250 202-720-7051